

COMMUNICATING WITH A LOVED ONE

Have you recently recognized some of the common warning signs of disordered eating and/or behaviors in a loved one living with type 1 diabetes? Are you unsure of how to approach your loved one with your observations and concerns? We understand that this may be a very difficult and scary time for you. This is not an easy conversation to instigate, especially with someone you love. Watching someone you love slowly kill themselves can be frightening. You will probably experience feelings of distress, anger, guilt and confusion. No matter how much you want to help them, the person struggling with the eating disorder is the only one who can choose recovery.

ARE YOU READY TO APPROACH YOUR LOVED ONE WITH YOUR CONCERNS? HERE ARE SOME IMPORTANT TIPS TO KEEP IN MIND BEFORE YOU HAVE THAT CONVERSATION:

Plan a time to talk. Set aside a time for a private, respectful meeting with your loved one to discuss your concerns openly and honestly in a caring, supportive way. Make sure you both will be free from distractions.

Use “I” statements. Avoid placing shame, blame or guilt on your loved one regarding their actions or attitudes. Focus on using “I” statements; for example, “I’m concerned about you.” Try to avoid using “you” statements such as, “You just need to take your insulin.”

Be prepared for negative reactions. Some ED-DMT1 sufferers are glad someone has noticed they are struggling. Others respond differently. Some may become angry and hostile, insisting you are the one with the problem. Others may brush off your concerns or minimize potential dangers. Both of these responses are normal.

It’s okay if they’re not ready to accept help yet. If your loved one refuses to acknowledge that there is a problem, restate your feelings and the reasons for them, and leave yourself open and available as a supportive listener.

Focus on feelings and relationships, not on weight and food. Share your memories of specific times when you felt concerned about this person’s eating behavior. Explain that you think these things may indicate that there could be a problem that needs professional help.

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Make sure you do not convey any fat prejudice or reinforce their desire to be thin. If they say they feel fat or want to lose weight, don't say things like, "You're not fat." Instead, suggest they explore their fears about being overweight and what it is they think they can achieve by being thin.

Do not criticize their eating habits or their diabetes management. People with eating disorders are trying to be in control. They don't feel in control of their life. Trying to trick or force them to eat can make things worse.

AVOID THE FOLLOWING COMMENTS AND LANGUAGE WHEN SPEAKING TO YOUR LOVED ONE:

"Are you making any progress?" A question like this can trigger a defensive response. The timeline for healing is different for everyone.

"Just take your insulin." If only it were that easy. There are deeper emotional issues preventing someone with ED-DMT1 from taking their insulin. An eating disorder is a mental illness.

"What have you eaten today?" Someone living with an eating disorder may not receive this question as a well intended inquiry. They may feel inclined to be dishonest by providing you with an answer they know you want to hear. Every meal can be a battle for someone in early recovery, and it can be exhausting to keep talking about it after it's over.

"You look so healthy! You were always too thin before." When someone is struggling with an eating disorder it's important to avoid ANY comments on their appearance. Even if you think it will sound encouraging and provide a sense of accomplishment - don't do it.

"You're going to kill yourself." Eating disorders are classified as a mental illness. No one chooses to become trapped in an all-consuming addiction. No one chooses to watch their life and relationships slowly fall apart. Every single person living with type 1 diabetes is aware of their mortality, and the associated risks of improper health management. A statement like this is not helpful in any way.

"You obviously are not trying to get better if you are just getting worse." Recovery is a long process and the person is going to have slips and relapses; you cannot expect the person to recover overnight. Relapses are a normal and unavoidable part of recovery.

"Boy, you ate a lot today." or **"You were certainly hungry today."** After a comment like this, the person is going to spend the next few hours or days obsessed with the amount of food they ate and whether it's making them fat. There is no reason to make any comments about how much they've eaten.

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